

DIVISION OF MOTOR VEHICLES
100 MAIN STREET
PAWTUCKET, RI 02860

APPLICATION IS HEREBY MADE TO THE DEPUTY DIRECTOR OF MOTOR VEHICLES FOR
PERMISSION TO EQUIP AND USE THE FOLLOWING DEVICE(S):

RED ☐ AMBULANCES

AMBER ☐ WRECKER TRUCKS, SERVICE STATION TRUCKS, STATE AND TOWN SNOWPLOWS
AND TRACTORS, LIGHT COMPANY TRUCKS, TELEPHONE COMPANY TRUCKS,
WATER COMPANY TRUCKS AND OTHER UTILITY TRUCKS, VEHICLES OF TELEVISION,
RADIO, AND PRESS PHOTOGRAPHERS, RURAL MAIL CARRIERS AND ALL MOTOR
PROPELLED VEHICLES OWNED BY THE NORTHERN RHODE ISLAND REACT
(RADIO EMERGENCY ASSOCIATION CITIZEN TEAM) WHEN ON OFFICIAL BUSINESS.

IN ORDER TO PROCESS THIS APPLICATION, PLEASE FILL OUT THE INFORMATION BELOW AND SUPPLY US WITH
A PERSONAL CHECK OR MONEY ORDER FOR \$5.00 MADE PAYABLE TO THE DIVISION OF MOTOR VEHICLES AND
A COPY OF THE VEHICLE'S REGISTRATION CERTIFICATE.

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

REGISTRATION: _____

YEAR	MAKE	BODY	VEHICLE IDENTIFICATION NUMBER
------	------	------	-------------------------------

LOCATION OF LIGHT ON VEHICLE: ☐ ROOF ☐ WINDOW ☐ OTHER _____

VEHICLE WILL BE USED FOR:

☐ SNOW REMOVAL ☐ AMBULANCE ☐ MUNICIPAL ☐ PUBLIC ☐ OTHER _____
EMERGENCY SERVICE

***IF OTHER, PLEASE EXPLAIN: _____

I HEREBY DECLARE THAT THE ABOVE INFORMATION IS TRUE AND I AGREE TO IMMEDIATELY
SURRENDER THIS PERMIT TO THE DIVISION OF MOTOR VEHICLES WHEN THE ABOVE VEHICLE
CEASES TO BE AN EMERGENCY VEHICLE OR IS SOLD OR TRANSFERRED BY ME.

IT IS UNDERSTOOD THAT THIS PERMIT MAY BE SUSPENDED OR CANCELLED BY THE DEPUTY DIRECTOR FOR
MOTOR VEHICLES OR HIS AUTHORIZED AGENT WHEN ANY OF THE TERMS UNDER WHICH THE PERMIT IS
ISSUED ARE VIOLATED.

SIGNATURE OF APPLICANT: _____ DATE: _____

☐ APPROVED ☐ DISAPPROVED BY: _____

PERMIT ISSUED BY: _____ STICKER: _____ DATE: _____